Office of the Secretary of State Building 1 Suite 157-K 1900 Kanawha Blvd E. Charleston, WV 25305



Mac Warner

Secretary of State State of West Virginia Phone: 304-558-6000

886-767-8683 Visit us online: www.wvsos.com

RORY L. PERRY II Sidney L. Christie Federal Bldg. 845 Fifth Avenue, Room 101 Huntington, WV 25701



Control Number: 258351

Defendant: ST MARY'S MEDICAL CENTER

2900 1ST AVENUE

HUNTINGTON, WV 25702 US

County: Federal

Civil Action: 3:17-01362

Certified Number: 92148901125134100002714397

Service Date: 6/5/2020

I am enclosing:

1 subpoena

which was served on the Secretary at the State Capitol as your statutory attorney-in-fact. According to law, I have accepted service of process in your name and on your behalf.

Please note that this office has no connection whatsoever with the enclosed documents other than to accept service of process in your name and on your behalf as your attorney-in-fact. Please address any questions about this document directly to the court or the plaintiff's attorney, shown in the enclosed paper, **not to the Secretary of State's office**.

Sincerely,

Mac Warner Secretary of State

Mac Warner

AO 88A (Rev. 02/14) Subpoena to Testify at a Deposition in a Civil Action

United States Di	STRICT COURT 👙 💈						
for the							
Southern District of West Virginia							
City of Huntington; Cabell County Commission							
Plaintiff)	79 P 69						
v.)	Civil Action No. 3:17-01362, 3:17-01665						
AmerisourceBergen Drug Corporation, et al.							
Defendant)	5.4 2 2						
SUBPOENA TO TESTIFY AT A DEPOSITION IN A CIVIL ACTION							
To: St. Mary's Me 2900 1st Ave, Hunt	dical Center SS						
(Name of person to whom	this subpoena is directed)						
Testimony: YOU ARE COMMANDED to appear at the time, date, and place set forth below to testify at a deposition to be taken in this civil action. If you are an organization, you must designate one of more officers, directors, or managing agents, or designate other persons who consent to testify on your behalf about the following matters, or those set forth in an attachment: See Exhibit A.							
Place: Bailes, Craig, Yon & Sellards PLLC 401 Tenth Street, Suite 500 Huntington, West Virginia 25701	Date and Time: 06/23/2020 2:00 pm						
The deposition will be recorded by this method: Stenography and videography							
Production: You, or your representatives, must also bri electronically stored information, or objects, and must p material:							
The following provisions of Fed. R. Civ. P. 45 are attached – Rule 45(c), relating to the place of compliance; Rule 45(d), relating to your protection as a person subject to a subpoena; and Rule 45(e) and (g), relating to your duty to respond to this subpoena and the potential consequences of not doing so.							
Date: 06/01/2020							
CLERK OF COURT							
	OR /s/ Gretchen M. Callas						
Signature of Clerk or Deputy Clerk	Attorney's signature						
The name, address, e-mail address, and telephone number of the attorney representing (name of party) All defendants; , who issues or requests this subpoena, are: see attached List of Counsel for Defendants							

Notice to the person who issues or requests this subpoena

If this subpoena commands the production of documents, electronically stored information, or tangible things before trial, a notice and a copy of the subpoena must be served on each party in this case before it is served on the person to whom it is directed. Fed. R. Civ. P. 45(a)(4).

AO 88A (Rev. 02/14) Subpoena to Testify at a Deposition in a Civil Action (Page 2)

Civil Action No. 3:17-01362; 3:17-01665

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)

	I received this subj	poena for (name of individual and title, if any)			4 //		
on <i>(date)</i>		•					
	☐ I served the subpoena by delivering a copy to the named individual as follows:						
-			on (date)	; or			
	☐ I returned the s	ubpoena unexecuted because:					
_							
		na was issued on behalf of the United S tness the fees for one day's attendance,					
My fees	are \$	for travel and \$	for services,	for a total of \$	0.00		
	I declare under per	nalty of perjury that this information is	true.				
	-						
Date:							
-			Server's signature				
			Printed name and title				
				7.7			
			Server's address				

Additional information regarding attempted service, etc.: